FEDERAL BUREAU OF INVESTIGATION
FOI/PA
DELETED PAGE INFORMATION SHEET
FOI/PA# 1262380-0

Total Deleted Page(s) = 1
Page 11 ~ b7D; b7E;

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XXXXXXXXXXXXXXXXXXXXXXXX
X   Deleted Page(s)    X
X   No Duplication Fee X
X   For this Page      X
XXXXXXXXXXXXXXXXXXXXXXXX
```

Name: ECO COLI 92-2909

Name of Place Frequented: Teamster Local 727
(Hangout)

Type of Establishment: Union Office
(see attached page)

Verification: D
(see attached page)

Street Address, City, State, and Zip Code Where Establishment is Located: 5956 West Fullerton Chicago, ILL

Frequency: Daily
(see attached page)

Average Length of stay: 5
(in days)

Dates of Travel: Unknown

Name of Lodging:

Street Address, City, State, and Zip Code of Lodging:

Mode of Travel:

Name of Carrier:

Verification:
(see attached page)

b6
b7C

FORM CM-79

Col

RELATIVES
(SPOUSE ONLY)

b6
b7C

Name of relative: [redacted]

Maiden name of relative: [redacted]

Sex F Marital Status M

Relationship to subject: Wife

Subrelation to subject:

Verification:

City, state, and zip code
where relative was born:

Date of birth:

Country of citizenship:

Verification:

City, state, and zip code
where relative died:

Date of death:

Cause of death:

Verification:

Dates of residence:

Name of apartment, hotel or pri [redacted]

b6
b7C

Street address, city, state and
zip code of residence: [redacted], ILL.

Apartment or room number:

Telephone number(s):

Verification:

FORM CM-84

92-2909

Name: Geo Coli
Dates of Employment: ~~Local 727~~ Since 1962
Name of Business Where Employed: Local 727
5956 West Fullerton
Chicago, Ill.

Address, City, State, and
Zip Code Where Employed:

Verification: D & I
(refer to attached pg. 1)
Type of Business:
(refer to attached pg. 1) Labor Union

Job Title: Sec-Tres
Annual Income: approx 60,000

Type of Financial Holding or
Obligation: (refer to attached pg. 2)

Verification:
(refer to attached pg. 1)

Name of Business:

Street Address, City, State, and Zip Code
Where Business or Real Estate is Located:

Type of Business:
(refer to attached pg. 1)

Number of Shares:
Percent(%) Control:
Face Value or Principal:
Annual Income:
(from financial holdings)

Type of Bank Account:
(refer to attached pg. 2)
Verification:
(refer to attached pg. 1)

Dates of Account:
Account Number:
Name of Bank:
Bank Branch Name:
Street Addre ss, City, State,
and Zip Code of Bank:

FORM CV 78

b6
b7C

OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA FPMR (41 CFR) 101-11.6

UNITED STATES GOVERNMENT

Memorandum

TO : SAC, CHICAGO (92-350-Sub 24) DATE: 12/20/72

FROM : SUPERVISOR VINCENT L. INSERRA

SUBJECT: RACKETEER PROFILE PROGRAM
CHICAGO DIVISION

In connection with captioned matter, the following Chicago hoodlums are being designated for inclusion in this program:

Subject	CG File No.	Agent Assigned
[redacted]	[redacted]	[redacted]
COLI, ECO	92-2909	
[redacted]		

b6
b7C
b7E

Agents to whom these cases are assigned are requested to promptly execute the appropriate Racketeer Profile Forms which will be transmitted to the Bureau by SA [redacted] coordinator of this program.

b6
b7C

1 - C-1 Tickler
1 - C-10 Tickler
1 - SA [redacted]
1 - Each Case Listed Above

VLI/vel
(24)

open 92-sub file VLI

92-2909 Sub 1
SEARCHED INDEXED
SERIALIZED FILED
[redacted]

Buy U.S. Savings Bonds Regularly on the Payroll Savings Plan

92-2909 Sub 1-2

SEARCHED INDEXED
SERIALIZED FILED
JAN 12 1973
FBI — CHICAGO

Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

AGENT AND SUBJECT IDENTIFICATION *DATE*

DATE

NAME OF PERSON SUBMITTING INFORMATION
/SUB:

b6
b7C

DATE			AGENCY	FIELD OFFICE
/YR: 73	/MO: 01	/DY: 05	/AGN: FBI	/FLD: E

OFFICE PHONE NUMBER
/PHN:

NEW OR MOD

NEW *MOD*

VERIFICATION	SUBJECT'S IDENTIFIER
/VER: ✓	/IDEN: 69E

NAME OF SUBJECT
/NAME: COLLI, ECO JAMES

SEX (M or F)	MARITAL STATUS (R)	MAIDEN NAME OF SUBJECT
/SEX: M	/STAT: M	/MDN:

ALIASES

ALIAS

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA: COLLI, JAMES ECO

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA: COLLI, JAMES E

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA: COLLEI JAMES E

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

NICKNAMES

NKNM

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK: LITTLE LOUIS

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

INVESTIGATION *CINV* *ADD*CINV* *CHG *CINV*

CINV

DATE INVESTIGATION BEGAN	DATE INVESTIGATION CLOSED
/FYR: 69 /FMO: 09 /FDY: 15	/TYR: 00 /TMO: 00 /TDY: 00

TYPE OF INVESTIGATION	AGENCY INVESTIGATING
/TINV:	/AGYI:

ADDITIONAL SOURCE OF INFORMATION *INFO* *ADD*INFO* *CHG *INFO*

INFO

NAME OF PERSON IN AGENCY TO CONTACT
/NAME:

TITLE OF ABOVE INDIVIDUAL
/TITLE:

DIVISION EMPLOYED BY
/DIV:

AGENCY NAME
/AG:

CITY WHERE AGENCY IS LOCATED
/CITY:

STATE (R)	ZIP CODE	LEVEL OF GOVERNMENT (R)
/ST:	/ZIP:	/LVL:

INFO *ADD*INFO* *CHG *INFO*

NAME OF PERSON IN AGENCY TO CONTACT
/NAME:

TITLE OF ABOVE INDIVIDUAL
/TITLE:

DIVISION EMPLOYED BY
/DIV:

AGENCY NAME
/AG:

CITY WHERE AGENCY IS LOCATED
/CITY:

STATE (R)	ZIP CODE	LEVEL OF GOVERNMENT (R)
/ST:	/ZIP:	/LVL:

FORM CM-75 (Ed. 5-72)

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

SUBJECT'S IDENTIFYING NUMBERS (*ID*) *ADD*ID* *CHG *ID*

ID

VERIFICATION /VER: V
FBI NUMBER /FBI: 4505973
ORG. CRIME & RACKET. # /OCR:
SOCIAL SECURITY NUMBER /SSN: 352037681
CRIMINAL IDENTIFICATION NUMBER /PD: D80437
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER /AGENCY: CHICAGO PD
STATE (R) /ST: IL
ZIP CODE /ZIP: 60605
ID *ADD*ID* *CHG *ID*

VERIFICATION /VER:
CRIMINAL IDENTIFICATION NUMBER /PD:
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER /AGENCY:
STATE (R) /ST:
ZIP CODE /ZIP:
ID *ADD*ID* *CHG *ID*

VERIFICATION /VER:
FBI NUMBER /FBI:
ORG. CRIME & RACKET. # /OCR:
SOCIAL SECURITY NUMBER /SSN:
CRIMINAL IDENTIFICATION NUMBER /PD:
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER /AGENCY:
STATE (R) /ST:
ZIP CODE /ZIP:
ID *ADD*ID* *CHG *ID*

VERIFICATION /VER:
CRIMINAL IDENTIFICATION NUMBER /PD:
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER /AGENCY:
STATE (R) /ST:
ZIP CODE /ZIP:

LICENSE OR MISCELLANEOUS NUMBERS (*NBRS*) *ADD*NBRS* *CHG *NBRS*

NBRS

VERIFICATION /VER: V
DATE OF ISSUE /FYR: 72 /FMO: 08 /FDY: 04
DATE OF EXPIRATION /TYR: 75 /TMO: 02 /TDY: 15
TYPE OF NUMBER OR LICENSE /TNBR: DRIVERS LICENSE
NUMBER /NBR: C400445220 46
ISSUING AGENCY /AGY: SECRETARY OF STATE
ISSUING STATE (R) /ST: IL
NBRS *ADD*NBRS* *CHG *NBRS*

VERIFICATION /VER:
DATE OF ISSUE /FYR: /FMO: /FDY:
DATE OF EXPIRATION /TYR: /TMO: /TDY:
TYPE OF NUMBER OR LICENSE /TNBR:
NUMBER /NBR:
ISSUING AGENCY /AGY:
ISSUING STATE (R) /ST:
NBRS *ADD*NBRS* *CHG *NBRS*

VERIFICATION /VER:
DATE OF ISSUE /FYR: /FMO: /FDY:
DATE OF EXPIRATION /TYR: /TMO: /TDY:
TYPE OF NUMBER OR LICENSE /TNBR:
NUMBER /NBR:
ISSUING AGENCY /AGY:
ISSUING STATE (R) /ST:

FORM CM-76 (Rev. 10-72)

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92-2909 Sub 1-3

SEARCHED ____ INDEXED ____
SERIALIZED CAB FILED CAB
FEB 15 1973
FBI — CHICAGO
VLI

15 Legitimate Enterprise

Sanitary-Truckers, Local 727, International Brotherhood of Teamsters, 5659 West Fullerton, Chicago

16 Illegal Activity

NONE KNOWN

17 Nicknames and or Alias

01 JAMES E. COLE
02 JAMES E. COLE "LITTLE LOUIS"

18 Description

Race	Complexion	Build
01 White	01 Light	01 Small
02 Negro	02 Ruddy	02 Slight
03 Other	03 Dark	03 Slender
	04 Olive	04 Stocky
	05 Swarthy	05 Heavy
		06 Obese
		07 Gross
		08 Medium

Height	Weight
01 Up to 5' 1"	01 Up to 120
02 5' 2" - 5' 3"	02 121 - 130
03 5' 4" - 5' 5"	03 131 - 140
04 5' 6" - 5' 7"	04 141 - 150
05 5' 8" - 5' 9"	05 151 - 160
06 5' 10" - 5' 11"	06 161 - 170
07 5' 11" - 6'	07 171 - 185
08 6' 0" - 6' 1"	08 186 - 200
09 6' 1" and over	09 Over

19 Areas of Activity Other Than Origin Office (Use the initials of office)

01 ____
02 ____
03 ____
04 ____

20 Places Frequented

Auto Leasing, 5241 West Madison, Chicago; Hendrickson Pontiac, 5151 West Madison, Chicago

Remarks:

File—Serial Charge Out
FD-5 (Rev. 6-17-70)

c48—16—83475-1 GPO

File _____ _____ _____ Date _____
Class. Case No. Last Serial

☐ Pending ☐ Closed

Serial No.	Description of Serial	Date Charged
4	Missed sir	
	Dereliging	

_____
Employee

RECHARGE Date _____

To _____ From _____

Initials of Clerk { _____ _____ _____

Date { _____ _____ _____

_____
Date Charged

_____
Employee

_____
Location

92-2909 Sub 1-5

SEARCHED INDEXED
SERIALIZED FILED
APR 26 1973
FBI—CHICAGO

Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

AGENT AND SUBJECT IDENTIFICATION *DATE*

DATE

NAME OF PERSON SUBMITTING INFORMATION
/SUB:

b6
b7C

DATE	AGENCY	FIELD OFFICE
/YR: 73 /MO: 04 /DY: 24	/AGN: FBI	/FLD: E

OFFICE PHONE NUMBER
/PHN

NEW OR MOD

NEW *MOD*

VERIFICATION	SUBJECT'S IDENTIFIER
/VER:	/IDEN: 69E

NAME OF SUBJECT
/NAME: COLI, ECO JAMES

SEX (M or F)	MARITAL STATUS (R)	MAIDEN NAME OF SUBJECT
/SEX:	/STAT:	/MDN:

ALIASES

ALIAS

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

NICKNAMES

NKNM

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

INVESTIGATION *CINV* *ADD*CINV* *CHG *CINV*

CINV

DATE INVESTIGATION BEGAN	DATE INVESTIGATION CLOSED
/FYR: /FMO: /FDY:	/TYR: /TMO: /TDY:

TYPE OF INVESTIGATION	AGENCY INVESTIGATING
/TINV: ANTIRACKETEERING	/AGYI:

ADDITIONAL SOURCE OF INFORMATION *INFO* *ADD*INFO* *CHG *INFO*

INFO

NAME OF PERSON IN AGENCY TO CONTACT
/NAME:

TITLE OF ABOVE INDIVIDUAL
/TITLE:

DIVISION EMPLOYED BY
/DIV:

AGENCY NAME
/AG:

CITY WHERE AGENCY IS LOCATED
/CITY:

STATE (R)	ZIP CODE	LEVEL OF GOVERNMENT (R)
/ST:	/ZIP:	/LVL:

INFO *ADD*INFO* *CHG *INFO*

NAME OF PERSON IN AGENCY TO CONTACT
/NAME:

TITLE OF ABOVE INDIVIDUAL
/TITLE:

DIVISION EMPLOYED BY
/DIV:

AGENCY NAME
/AG:

CITY WHERE AGENCY IS LOCATED
/CITY:

STATE (R)	ZIP CODE	LEVEL OF GOVERNMENT (R)
/ST:	/ZIP:	/LVL:

FORM CM-75 (Ed. 5-72)

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

VITAL STATISTICS ON SUBJECT (BIRTH) *ADD*BIRTH* *CHG *BIRTH*

BIRTH

VERIFICATION /VER:
CITY WHERE SUBJECT WAS BORN /CITY: CHICAGO
STATE (R) /ST: IL
ZIP CODE /ZIP: 60600
DATE OF BIRTH /FYR: 22 /FMO: 02 /FDY: 15
CITIZENSHIP (R) /CIT:

DEATH

DEATH *ADD*DEATH* *CHG *DEATH*

VERIFICATION /VER:
CITY WHERE SUBJECT DIED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
DATE OF DEATH /TYR: /TMO: /TDY:
CAUSE OF DEATH /DEAD:

PHYSICAL DESCRIPTION (PHYS) *ADD*PHYS* *CHG *PHYS*

PHYS

VERIFICATION /VER:
MENTAL OR PHYSICAL HEALTH PROBLEM /HLTH:
HAIR COLOR (R) /HAIR: BROWN
HEIGHT /HT: 508
FINGERPRINT CLASSIFICATION (R) /FING:
EYE COLOR (R) /EYE: BROWN
PHYSICAL MARK, SCAR, ETC. (R) /MARK:
COMPLEXION (R) /CMPLX:
WEIGHT /WT: 170
RACE (R) /RACE:
BUILD (R) /BLD: MEDIUM

PHYS *ADD*PHYS* *CHG *PHYS*

VERIFICATION /VER:
PHYSICAL MARK, SCAR, ETC. (R) /MARK:
MENTAL OR PHYSICAL HEALTH PROBLEM /HLTH:

SUBJECT'S RESIDENCE/TELEPHONE (ADDR) *ADD*ADDR* *CHG *ADDR*

ADDR

APARTMENT, HOTEL, OR PRISON NAME /EST:
STREET NUMBER /STNBR: 3479
STREET NAME /STNM: WHIRLAWAY
VERIFICATION /VER:
CITY OF RESIDENCE /CITY: NORTHBROOK
STATE (R) /ST: IL
ZIP CODE /ZIP: 60062
DATES OF RESIDENCE /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
APARTMENT OR ROOM NO. /APT:
TELEPHONE (1) /TEL1: 3122728997
TELEPHONE (2) /TEL2:

EDUCATION *ED* *ADD*ED* *CHG *ED*

ED

VERIFICATION /VER:
ATTENDANCE DATES /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
NAME OF SCHOOL /EST:
STREET NUMBER /STNBR:
STREET NAME /STNM:
CITY WHERE SCHOOL IS LOCATED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
TYPE OF SCHOOL (R) /SCH:
HIGHEST GRADE COMPLETED (R) /GRD:
MAJOR /MJR:

MILITARY RECORD *MIL* *ADD*MIL* *CHG *MIL*

MIL

VERIFICATION /VER:
DATES IN SERVICE /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
BRANCH OF SERVICE (R) /BRCH:
MILITARY OCCUPATIONAL SPECIALITY /MOS:
HIGHEST GRADE or RANK /RANK:
TYPE OF SEPARATION /SEP:
RESERVE BRANCH (R) /RSRV:
HIGHEST GRADE or RANK (Reserve) /RNK:
RESERVE DATES /NYR: /NMO: /NDY: /MYR: /MMO: /MDY:

HOBBY *HOBBY* *ADD*HOBBY* *CHG *HOBBY*

HOBBY

KIND OF HOBBY /HOB:
CITY WHERE HOBBY TAKES PLACE /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
ANNUAL COST (Dollars) /COST:

FORM CM-77 (Ed. 5-72)

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92-2909 Sub 1

SEARCHED INDEXED
SERIALIZED FILED
APR 26 1973
FBI—CHICAGO

92-2909 Sub 1-6

SEARCHED ____ INDEXED ____
SERIALIZED ____ FILED ____
JUL 31 1973
FBI—CHICAGO
VL

Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

AGENT AND SUBJECT IDENTIFICATION *DATE*

DATE

NAME OF PERSON SUBMITTING INFORMATION
/SUB:

b6
b7C

DATE			AGENCY	FIELD OFFICE
/YR: 73	/MO: 07	/DY: 30	/AGN: FBI	/FLD: E

/PHN:

NEW OR MOD

NEW (*MOD*)

VERIFICATION	SUBJECT'S IDENTIFIER
/VER:	/IDEN: 69E

NAME OF SUBJECT
/NAME: COLI, ECO JAMES

SEX (M or F)	MARITAL STATUS (R)	MAIDEN NAME OF SUBJECT
/SEX:	/STAT:	/MDN:

ALIASES

ALIAS

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

ALIAS *ALIAS* *ADD*ALIAS* *CHG *ALIAS*
/AKA:

NICKNAMES

NKNM

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

NICKNAME *NKNM* *ADD*NKNM* *CHG *NKNM*
/NICK:

INVESTIGATION *CINV* (*ADD*CINV*) *CHG *CINV*

CINV

DATE INVESTIGATION BEGAN			DATE INVESTIGATION CLOSED		
/FYR:	/FMO:	/FDY:	/TYR:	/TMO:	/TDY:

TYPE OF INVESTIGATION	AGENCY INVESTIGATING
/TINV: AR	/AGYI:

ADDITIONAL SOURCE OF INFORMATION *INFO* *ADD*INFO* *CHG *INFO*

INFO

NAME OF PERSON IN AGENCY TO CONTACT
/NAME:

TITLE OF ABOVE INDIVIDUAL
/TITLE:

DIVISION EMPLOYED BY
/DIV:

AGENCY NAME
/AG:

CITY WHERE AGENCY IS LOCATED
/CITY:

STATE (R)	ZIP CODE	LEVEL OF GOVERNMENT (R)
/ST:	/ZIP:	/LVL:

INFO *ADD*INFO* *CHG *INFO*

NAME OF PERSON IN AGENCY TO CONTACT
/NAME:

TITLE OF ABOVE INDIVIDUAL
/TITLE:

DIVISION EMPLOYED BY
/DIV:

AGENCY NAME
/AG:

CITY WHERE AGENCY IS LOCATED
/CITY:

STATE (R)	ZIP CODE	LEVEL OF GOVERNMENT (R)
/ST:	/ZIP:	/LVL:

FORM CM-75 (Ed. 5-72)

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

SUBJECT'S EMPLOYMENT *EMP* *ADD*EMP* *CHG *EMP*

EMP

VERIFICATION: /VER: I
DATES OF EMPLOYMENT: /FYR: 62 /FMO: 00 /FDY: 00 /TYR: 00 /TMO: 00 /TDY: 00
NAME OF BUSINESS WHERE EMPLOYED: /EST: LOCAL 727
STREET NUMBER: /STNBR: 5956
STREET NAME: /STNM: FULLERTON W
CITY WHERE BUSINESS IS LOCATED: /CITY: CHICAGO
STATE (R): /ST: IL
ZIP CODE: /ZIP: 60600
TYPE OF BUSINESS (R): /BUS: UNION
JOB TITLE (DESCRIPTION OF WORK): /JOB: SECY TREASURER
ANNUAL INCOME (IN THOUS.): /SAL: 60

FINANCIAL HOLDING OR OBLIGATION *FINAN* *ADD*FINAN* *CHG *FINAN*

FINAN

VERIFICATION: /VER:
TYPE OF HOLDING OR OBLIGATION (R): /TFIN:
NAME OF BUSINESS: /EST:
STREET NUMBER: /STNBR:
STREET NAME: /STNM:
CITY WHERE BUSINESS OR REAL ESTATE IS LOCATED: /CITY:
STATE (R): /ST:
ZIP CODE: /ZIP:
TYPE OF BUSINESS (R): /BUS:
% CONTROL: /CONT:
NUMBER OF SHARES (IN 100'S): /SHR:
FACE VALUE OR PRINCIPAL (IN 100'S): /VALUE:
ANNUAL INCOME (IN 100'S): /INC:

FINAN *ADD*FINAN* *CHG *FINAN*

VERIFICATION: /VER:
TYPE OF HOLDING OR OBLIGATION (R): /TFIN:
NAME OF BUSINESS: /EST:
STREET NUMBER: /STNBR:
STREET NAME: /STNM:
CITY WHERE BUSINESS OR REAL ESTATE IS LOCATED: /CITY:
STATE (R): /ST:
ZIP CODE: /ZIP:
TYPE OF BUSINESS (R): /BUS:
% CONTROL: /CONT:
NUMBER OF SHARES (IN 100'S): /SHR:
FACE VALUE OR PRINCIPAL (IN 100'S): /VALUE:
ANNUAL INCOME (IN 100'S): /INC:

BANK ACCOUNT *BANK* *ADD*BANK* *CHG *BANK*

BANK

VERIFICATION: /VER:
DATES OF ACCOUNT: /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
TYPE OF ACCOUNT (R): /ACCT:
ACCOUNT NUMBER: /ACCTNBR:
NAME OF BANK: /EST:
BANK BRANCH NAME: /BRNM:
STREET NUMBER: /STNBR:
STREET NAME: /STNM:
CITY WHERE BANK IS LOCATED: /CITY:
STATE (R): /ST:
ZIP CODE: /ZIP:

BANK *ADD*BANK* *CHG *BANK*

VERIFICATION: /VER:
DATES OF ACCOUNT: /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
TYPE OF ACCOUNT (R): /ACCT:
ACCOUNT NUMBER: /ACCTNBR:
NAME OF BANK: /EST:
BANK BRANCH NAME: /BRNM:
STREET NUMBER: /STNBR:
STREET NAME: /STNM:
CITY WHERE BANK IS LOCATED: /CITY:
STATE (R): /ST:
ZIP CODE: /ZIP:

FORM CM-78 (Ed. 5-72)

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

HANGOUTS AND PLACES FREQUENTED

(*HANGOUT*) *ADD*HANGOUT* *CHG *HANGOUT*

HANGOUT

VERIFICATION /VER: D
TYPE OF ESTABLISHMENT (R) /TEST: UNION OFFICES
NAME OF PLACE FREQUENTED (HANGOUT) /EST: TEAMSTER LOCAL 727
STREET NUMBER /STNBR: 5956
STREET NAME /STNM: FULLERTON W
CITY WHERE ESTABLISHMENT IS LOCATED /CITY: CHICAGO
STATE (R) /ST: IL
ZIP CODE /ZIP: 60600
FREQUENCY (R) /FRE: DAILY
AVERAGE LENGTH OF STAY (in days) /STAY: 5
HANGOUT *ADD*HANGOUT* *CHG *HANGOUT*

VERIFICATION /VER:
TYPE OF ESTABLISHMENT (R) /TEST:
NAME OF PLACE FREQUENTED (HANGOUT) /EST:
STREET NUMBER /STNBR:
STREET NAME /STNM:
CITY WHERE ESTABLISHMENT IS LOCATED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
FREQUENCY (R) /FRE:
AVERAGE LENGTH OF STAY (in days) /STAY:
HANGOUT *ADD*HANGOUT* *CHG *HANGOUT*

VERIFICATION /VER:
TYPE OF ESTABLISHMENT (R) /TEST:
NAME OF PLACE FREQUENTED (HANGOUT) /EST:
STREET NUMBER /STNBR:
STREET NAME /STNM:
CITY WHERE ESTABLISHMENT IS LOCATED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
FREQUENCY (R) /FRE:
AVERAGE LENGTH OF STAY (in days) /STAY:
HANGOUT *ADD*HANGOUT* *CHG *HANGOUT*

VERIFICATION /VER:
TYPE OF ESTABLISHMENT (R) /TEST:
NAME OF PLACE FREQUENTED (HANGOUT) /EST:
STREET NUMBER /STNBR:
STREET NAME /STNM:
CITY WHERE ESTABLISHMENT IS LOCATED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
FREQUENCY (R) /FRE:
AVERAGE LENGTH OF STAY (in days) /STAY:
HANGOUT *ADD*HANGOUT* *CHG *HANGOUT*

TRAVEL

TRAVEL *ADD*TRAVEL* *CHG *TRAVEL*

TRAVEL

VERIFICATION /VER:
DATES OF TRAVEL /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
NAME OF LODGING /EST:
STREET NUMBER /STNBR:
STREET NAME /STNM:
CITY WHERE LODGING IS LOCATED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
MODE OF TRAVEL (R) /MODE:
NAME OF CARRIER /CARNM:
TRAVEL *ADD*TRAVEL* *CHG *TRAVEL*

VERIFICATION /VER:
DATES OF TRAVEL /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:
NAME OF LODGING /EST:
STREET NUMBER /STNBR:
STREET NAME /STNM:
CITY WHERE LODGING IS LOCATED /CITY:
STATE (R) /ST:
ZIP CODE /ZIP:
MODE OF TRAVEL (R) /MODE:
NAME OF CARRIER /CARNM:

FORM CM-79 (Ed. 5-72)

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice

RACKETEER PROFILE

RELATIVE *RELAT* *ADD*RELAT* *CHG *RELAT*

RELAT

VERIFICATION /VER:

NAME OF RELATIVE /NAME:

MAIDEN NAME OF RELATIVE /MDN: | SEX (M OR F) /SEX: | MARITAL STATUS(R) /STAT:

RELATIONSHIP TO SUBJECT (R) /REL:

SUBRELATION TO SUBJECT /SREL:

VITAL STATISTICS ON RELATIVE *RELBIRTH* *ADD *RELBIRTH* *CHG *RELBIRTH*

RELBIRTH

VERIFICATION /VER: | CITY WHERE RELATIVE WAS BORN /CITY:

STATE (R) /ST: | ZIP CODE /ZIP: | DATE OF BIRTH /FYR: /FMO: /FDY: | CITIZENSHIP (R) /CIT:

RELDEATH *ADD *RELDEATH* *CHG *RELDEATH*

RELDEATH

VERIFICATION /VER: | CITY WHERE RELATIVE DIED /CITY:

STATE (R) /ST: | ZIP CODE /ZIP: | DATE OF DEATH /TYR: /TMO: /TDY:

CAUSE OF DEATH /DEAD:

RELATIVE'S RESIDENCE/TELEPHONE *RELAD* *ADD *RELAD* *CHG *RELAD*

RELAD

VERIFICATION /VER: | DATES OF RESIDENCE /FYR: /FMO: /FDY: /TYR: /TMO: /TDY:

APARTMENT, HOTEL OR PRISON NAME /EST:

STREET NUMBER /STNBR: | STREET NAME /STNM:

CITY OF RESIDENCE /CITY:

STATE (R) /ST: | ZIP CODE /ZIP: | APARTMENT OR ROOM NO. /APT:

TELEPHONE (1) /TEL1: | TELEPHONE (2) /TEL2:

RELATIVE'S EMPLOYMENT *RELEMP* *ADD *RELEMP* *CHG *RELEMP*

RELEMP

VERIFICATION /VER:

NAME OF BUSINESS WHERE EMPLOYED /EST:

STREET NUMBER /STNBR: | STREET NAME /STNM:

CITY WHERE BUSINESS IS LOCATED /CITY:

STATE (R) /ST: | ZIP CODE /ZIP:

RELATIVE'S IDENTIFYING NUMBERS *RELID* *ADD *RELID* *CHG *RELID*

RELID

VERIFICATION /VER: | FBI NUMBER /FBI:

ORGANIZED CRIME & RACKETEERING NUMBER /OCR: | SOCIAL SECURITY NUMBER /SSN:

POLICE DEPARTMENT NUMBER /PD:

POLICE DEPARTMENT CITY /CITY:

STATE (R) /ST: | ZIP CODE /ZIP:

RELID *ADD *RELID* *CHG *RELID*

VERIFICATION /VER: | POLICE DEPARTMENT NUMBER /PD:

POLICE DEPARTMENT CITY /CITY:

STATE (R) /ST: | ZIP CODE /ZIP:

FORM CM-84 (Ed. 5-72)

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92-2909 Sub 1-6

SEARCHED ____ INDEXED ____
SERIALIZED ____ FILED ____
JUL 31 1973
FBI—CHICAGO
VL

b6
b7C

FORM CM-77

VITAL STATISTICS

Name: COLE, Geo J
Date of Birth: 12/15/22
Place of Birth: City Chicago State ILL Zip Code
Citizenship: Country Verification? (Page 10)

Date of Death:
Place of Death: City State Zip Code
Cause of Death:
Verification ? (Page 10)

Height: 5'8" Weight: 170
Hair Color: Brown Eye Color: Brown
Build: Medium Complexion:
Race: Physical Mark, Scar, Etc:
Mental or Physical (A) Kind of mark
Health Problem: (B) Position
Verification? (p.10) (C) Body part

(For above, see page 22)

Residence: Street Number 3479 Whitlaway City Northbrook
State ILL. Zip Code
Name of Apartment, Hotel or Prison:
Apartment or Room Number:
Dates of Residence:
Telephone Number (s) 312-272-8997
Verification? (Page 10)

Education:
Name of School:
Address: Street Number City
State Zip Code
Type of School: (p. 18)
Highest Grade Completed: (p. 18)
Major:
Attendance Dates:
Verification? (p. 10)

Military Record: Highest Grade or Rank:
Dates in Service:
Branch of Service: (p. 22) Type of Separation:
Military Occupational Specialty:
Reserve Branch :
Highest Grade or Rank (Reserve):
Reserve Dates:
Verification?

Hobby:
Kind of Hobby:
Where Hobby Takes Place: City State Zip Code
Annual Cost: